PLACE OF DEATH	Arizona Terr	F VITAL STAT	ristics
COUNTY COONISE		ERTIFICATE OF	
DISTRICT Douglas			OUNTY REGISTERED NO. 38
OF CITY I LE WILL (If death occur	rred in a Hospital or Institution, give	ST. I	OCAL REGISTRAR'S NO.
FULL NAME 0	nagdilma s	er na d	Butting
PERSONAL AND STATISTICAL PARTICU		MEDICAL CERTIFI	CATE OF DEATH
SEX COLOR or RACE White Louisian Physic Change or Divol	CD	CATH (Month)	(bay) (Year)
DATE OF BIRTH Mullnow	1	y certify , that I attended (	deceased from
(Month) (Day)	19 191 to on on on	191	and that death occurred on the date
2 - 4	ess than 1 day,stated abo	10 F & 1	e DISEASE or INJURY causing Death
CCUPATION	was as follo	hility and	a did not thou
(a) Trade, profession or particular kind of work (b) General nature of industry, business, or establishment in	The state of the s	median	attendown/
which employed (or employer)		(Dura	tion) yrs mys days
(State or country) Wry 100	Was diseas	e contracted in Arizona?	1-
NAME OF ATHER	If not, who	re?	1 A
O BIRTHPLACE OF FATHER	CONTRIBU	•	mos days.
E FATHERY (State or country)	<u>-                                    </u>	(Duratic	) / E / Ceran
of MOTHER Refula on	manyla (Signed)	CA M. Sun	1 to apply comments
BIRTHPLACE OF MOTHER (State or country)	<i>(</i> )	ths from Violent Cause	s, state (1) Means of Injury;and(2)
TE ABOVE IS TRUE TO THE BEST OF MY KNO	OWLEDGE whether	OF RESIDENCE	10
(Informant) Indad 34	At place	of deathyrsmos	ds.In Arizons 4s mos ds
(Address) Pretty into		, Usual Residence	may recup
PLACE OF BURIAL OR REMOVAL DATE OF BUILDING	RIAL OR REMOVAL	<b>a</b> 191/2	1 01/ Local Registrar
UNDERTAKAR   ADDRESS	Filed	7/1///191	County Registrar.